100 1 5 JOUE A	this form, tổgether w	G _z	or <u>F</u>	Fax (P.O. Box 1450 Alexandria, Virg (571)-273-2885	inia 22313-1450	
NSTRUCTIONS This for his for his formation of the formati	m should be used for tran respondence including the l pelow or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	IE FEE and PU ders and notific) specifying a r	JBLICA cation of new co	ATION FEE (if requof maintenance fees vorrespondence address	ired). Blocks 1 through 5 s vill be mailed to the current and/or (b) indicating a sep	should be completed where correspondence address a arate "FEE ADDRESS" fo
maintenance fee notification CURRENT CORRESPONDENC 26161 75 FISH & RICHAR	E ADDRESS (Note: Use Block 1 for 90 04/12/2006	any change of address)		F	Fec(s) Transmittal. The papers. Each additional have its own certificate	mailing can only be used for its certificate cannot be used all paper, such as an assignment of mailing or transmission. tificate of Mailing or Transmits is Fee(s) Transmittal is bein	for any other accompanying ent or formal drawing, mus
P.O. BOX 1022 MINNEAPOLIS, N	MN 55440-1022			a t	States Postal Service vaddressed to the Mai transmitted to the USP	is Fee(s) Transmittal is bein vith sufficient postage for fir I Stop ISSUE FEE address TO (571) 273-2885, on the c	st class mail in an envelop above, or being facsimil date indicated below.
6/16/2006 HDESTA2 000				Ĺ	CHE	LYL A. FORREST	(Depositor's name)
FC:1501 FC:1504	1400.00 OP 300.00 OP			L	<u> </u>	yla. Four	(Signature
FC:8001	30.00 OP			Į		6-13-06	(Date
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/795,808	03/08/2004	·	Peter J. De Groot 09712-341001 / Z-440 7				7712
APPLN. TYPE			EE	PUI	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	<u>I.</u>	PUI	\$300	\$1700	07/12/2006
	-	\$1400 ART UN)			` ,	
nonprovisional EXAM LYONS, M	IINER IICHAEL A	ART UN 2877	ווֹד	CL	\$300	` ,	
nonprovisional EXAM LYONS, M Change of correspondence CFR 1.363). Change of correspondence Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.	INER IICHAEL A e address or indication of "Formula address (or Change of 22) attached. tion (or "Fee Address" Indicator more recent) attached. Use	ART UN 2877 ec Address" (37 Correspondence ation form e of a Customer	2. For printin (1) the name or agents OF (2) the name registered at 2 registered listed, no name	ng on the es of up R, alterney patent ime will	\$300 ASS-SUBCLASS 356-511000 he patent front page, lip to 3 registered patenatively, ingle firm (having as or agent) and the nanattorneys or agents. If l be printed.	st 1_ Fish a member a 1_ ses of up to	07/12/2006
nonprovisional EXAM LYONS, M I. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND	diner IICHAEL A e address or indication of "Formation of	ART UN 2877 ee Address" (37 Correspondence ation form e of a Customer BE PRINTED ON T	2. For printin (1) the name or agents OF (2) the name registered at 2 registered listed, no nan THE PATENT (data will appea T a substitute fo	on the se of up a set torney patent a me will (print on the filing)	\$300 ASS-SUBCLASS 356-511000 he patent front page, lip to 3 registered patenatively, ingle firm (having as or agent) and the nanattorneys or agents. If l be printed.	\$1700 st	07/12/2006 & Richardson P
nonprovisional EXAM LYONS, M Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in	INER IICHAEL A e address or indication of "Formation of	ART UN 2877 ee Address" (37 Correspondence ation form e of a Customer BE PRINTED ON T	2. For printing (1) the name or agents OF (2) the name registered at 2 registered listed, no nanother PATENT (data will appea T a substitute for (B) RESIDEN	ng on the soft up of	\$300 ASS-SUBCLASS 356-511000 the patent front page, lip to 3 registered patenatively, ingle firm (having as or agent) and the nan attorneys or agents. If lip be printed. Trype) the patent. If an assign an assignment.	\$1700 st	07/12/2006 & Richardson P
nonprovisional EXAM LYONS, M I. Change of correspondence CFR 1.363). Change of correspondence Address form PTO/SB/1: "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. B. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth ir (A) NAME OF ASSIGN Zygo Corpo	diner IICHAEL A e address or indication of "Formation of "Formation" I RESIDENCE DATA TO Be an assignee is identified by a 37 CFR 3.11. Completion of the complet	ART UN 2877 ec Address" (37 Correspondence ation form e of a Customer BE PRINTED ON Telow, no assignce of this form is NO	2. For printing (1) the name or agents OF (2) the name registered at 2 registered listed, no nano THE PATENT (data will appear T a substitute for (B) RESIDEN Middl	ng on the es of up R, alterne es of a sittorney patent me will (print or filing ICE: (Cefie	\$300 ASS-SUBCLASS 356-511000 The patent front page, lip to 3 registered patentatively, ingle firm (having as or agent) and the nanattorneys or agents. If le printed. Trype) The patent. If an assignment. Try and STATE OR (1)	\$1700 st	07/12/2006 & Richardson P document has been filed f
nonprovisional EXAM LYONS, M I. Change of correspondence CFR 1.363). Change of correspondence Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth ir (A) NAME OF ASSIGN Zygo Corpo Please check the appropriate 4a. The following fee(s) are	diner dichael A e address or indication of "Formation (or "Fee Address" Indicator more recent) attached. Using the properties of the prope	ART UN 2877 ec Address" (37 Correspondence ation form e of a Customer BE PRINTED ON The low, no assignce of this form is NO orices (will not be presented to the process of the prices (will not be presented to the prices (will not be	2. For printing (1) the name or agents OF (2) the name registered at 2 registered listed, no nanother patterns (B) RESIDEN Middle inted on the patterns (C) Payment of For Middle in Payment by The Director (C) the name of the patterns (C) Payment by The Director (C) the name of the patterns (C) Payment by The Director (C) the name of the patterns (C) Payment by The Director (C) the name of the patterns (C) the name of t	ng on the es of up R, alterne will form the filing ICE: (C efie tent):	\$300 ASS-SUBCLASS 356-511000 The patent front page, lip to 3 registered patentatively, ingle firm (having as or agent) and the nanattorneys or agents. If le printed. Trype) The patent. If an assignment. Try and STATE OR (1) Individual CT Individual CT	st nt attorneys I Fish a member a les of up to no name is COUNTRY) corporation or other private grandlesed. I is attached. I arge the required fee(s), or creating attached.	07/12/2006 & Richardson P document has been filed for the following state of the followin
nonprovisional EXAM LYONS, M I. Change of correspondence CFR 1.363). Change of correspondence Address form PTO/SB/17 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Zygo Corpo Please check the appropriate Issue Fee Publication Fee (No service) Advance Order - # of Change in Entity Status a. Applicant claims S	diner dichael A e address or indication of "Formation (or "Fee Address" Indicator more recent) attached. Use the properties of the proper	ART UN 2877 ee Address" (37 Correspondence ation form e of a Customer BE PRINTED ON Telow, no assignee of this form is NO ories (will not be pr 4b ed) 27 27 27 27 28 28 27 27 28 28 28 28 28 28 28 28 28 28 28 28 28	2. For printin (1) the name or agents OF (2) the name registered at 2 registered listed, no nau THE PATENT (data will appea T a substitute fo (B) RESIDEN Middl. The Direct of Payment by The Direct of Deposit Ac	ng on the es of up R, alterney patent ime will (print on the print of the print of the estate of the am y credit or is her count?)	\$300 ASS-SUBCLASS 356-511000 The patent front page, lip to 3 registered patentatively, ingle firm (having as or agent) and the nanattorneys or agents. If le printed. Trype) Trype Trype Try and STATE OR of the fee(s) is entered and state or the fee(s) is entered and feeling and state of the fee(s) is entered and feeling and state of the fee(s) is entered and feeling and	\$1700 st nt attorneys 1 Fish a member a 2 nes of up to no name is 3 nee is identified below, the of COUNTRY) corporation or other private grandlessed. 8 is attached. arge the required fee(s), or crandlessed are calculated. arge the required fee(s), or crandlessed.	07/12/2006 & Richardson P document has been filed f roup entity Governme edit any overpayment, to tra copy of this form).
nonprovisional EXAM LYONS, M I. Change of correspondence CFR 1.363). Change of correspondence Address form PTO/SB/17 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Zygo Corpo Please check the appropriate Issue Fee Publication Fee (No service) Advance Order - # of Change in Entity Status a. Applicant claims S	diner dichael A e address or indication of "Formation (or "Fee Address" Indicator more recent) attached. Use the properties of the proper	ART UN 2877 ee Address" (37 Correspondence ation form e of a Customer BE PRINTED ON Telow, no assignee of this form is NO ories (will not be pr 4b ed) 27 27 27 27 28 28 27 27 28 28 28 28 28 28 28 28 28 28 28 28 28	2. For printin (1) the name or agents OF (2) the name registered at 2 registered listed, no nau THE PATENT (data will appea T a substitute fo (B) RESIDEN Middl. The Direct of Payment by The Direct of Deposit Ac	ng on the es of up R, alterney patent ime will (print on the print of the print of the estate of the am y credit or is her count?)	\$300 ASS-SUBCLASS 356-511000 The patent front page, lip to 3 registered patentatively, ingle firm (having as or agent) and the nanattorneys or agents. If le printed. Trype) Trype Trype Try and STATE OR of the fee(s) is entered and state or the fee(s) is entered and feeling and state of the fee(s) is entered and feeling and state of the fee(s) is entered and feeling and	st nt attorneys 1 Fish a member a 2 nes of up to no name is 3 nee is identified below, the of COUNTRY) corporation or other private grantelesed. 8 is attached. arge the required fee(s), or crantelese and extended.	07/12/2006 & Richardson P document has been filed roup entity ☐ Government edit any overpayment, to tra copy of this form). CFR 1.27(g)(2).

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Registration No. 56,842

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Typed or printed name ____

Marc M. Wefers